CDC Project Firstline
Chapter Town Hall
AAP CA CHAPTER 3 and ORANGE COUNTY CHAPTER
Wednesday, February 17, 2021
6:30PM - 8:00PM
WELCOME

Kate Williamson, MD, FAAP
President, AAP-OC Chapter
• Participants will be muted upon entering the call and will remain muted during the chat

• Use the Q and A to ask questions of the panelists or for any technical assistance

• The post evaluation link will be placed in the chat now and at the end of the conference (it will also be emailed to participants on 2/24/21).

  • Everyone please complete the evaluation!
CME Committee members have no relevant financial relationships with the manufacturer of commercial products or services discussed in this presentation.

The chapter staff associated with the review or planning of this presentation have no relevant financial relationships with the manufacturer of commercial products or services discussed in this presentation.
THANK YOU TO OUR FUNDERS

Thank you to AAP & the US Dept. of Health and Human Services, Centers for Disease Control and Prevention (CDC)

CDC Project Firstline webpage:
www.cdc.gov/infectioncontrol/projectfirstline/index.html
Project Firstline is a Centers for Disease Control and Prevention (CDC) national health care workforce infection prevention and control (IPC) training collaborative that aims to educate all 6 million US health care workers with the foundational understanding of IPC to protect the nation from infectious disease threats, such as COVID-19. The AAP is one of several partners in this initiative.

As a Project Firstline partner, the AAP serves as a virtual training center on infection prevention and control. The goal of the center is to expand and strengthen the capacity, collaboration, and coordination of pediatric health care providers during the ongoing response to COVID-19, and to improve the health of all children and their families. This training center will include educational materials, collaborative learning opportunities, and clinical practice enhancements.
AAP-OC CHAPTER CME SURVEYS

Evaluation Form for Tonight’s Meeting
• Please complete, even if not needing CME
• www.surveymonkey.com/r/CME_ProjectFirstline02_17_21

MOC-2 Online Post-Test
• Must earn at least 80% for MOC-2 Credit Hours
• May take as many times as needed
• www.surveymonkey.com/r/MOC_ProjectFirstline02_17_21
STUDENT SYMPTOM DECISION TREE

UCI-OCHCA-CHOC Collaboration

- Designed for real-time use by nurses or health aids
- Based on CDC, CDPH, and AAP guidelines
RETURN-TO-SCHOOL GUIDANCE FORM

UCI-OCHCA-CHOC Collaboration

Designed for pediatricians helping kids return safely to school when they develop sick symptoms
AAP-OC COVID VACCINE PROMOTION

● Share pictures with Jamie at jamie@aap-oc.org for us to post on your behalf, or share on your own social media

● Tag us using #IGotTheShot and #ThisIsOurShot
  ○ Facebook: @AAPOCCChapter4 and @AAPOC4Families
  ○ Twitter: @OCAAP
  ○ Instagram: @OCAAP and @AAPOC4Families

● AAP-OC Attendees: Send Jamie your picture and mailing address to receive AAP-OC Chapter #IGotTheShot Buttons for you and your team to wear throughout 2021 and further promote the vaccine in the community.
WHAT ELSE?

● PPE supplies
● COVID-19 updates
● ACES
● Reach Out & Read
● Young Physician Mentorship
● Injury & Violence Prevention
● Mental Health
● Team KiPOW
● Homeless Youth with Illumination Foundation
AAP-OC 4 Families: Helping You and Your Family Stay Safe and Healthy

AAP-OC 4 Families is a collaboration of pediatricians and community partners to help you keep your family safe, fit and healthy.

As The Hub for Children’s Health in Orange County, we have video messages and links to community resources to keep your children safe and healthy.

COVID-19 Information
Learn how you can protect your child.
Learn more

Diet & Exercise
Keep your child fit with these fun videos.
Learn more

Health & Safety
Watch these videos and keep your whole family safe.
Learn more

Videos 4 Kids!
Get moving with these fun videos with your kids.
Learn more

Our Partners
Learn about our partners and find links to their websites.
Learn more
Michelle Dern, MD, FAAP
President, AAP-CA Chapter 3
COVID-19 Symptom Decision Tree

*Applies regardless of vaccination status.

At school, student or staff member develops any one of the following signs or symptoms:

- Fever with or without chills/rigors (fever defined as \( > 100.4 \) that does not resolve within 30 min without medication)
- Cough
- Shortness of breath
- Nasal congestion/rhorrhea (runny nose)
- Sore throat
- Nausea, vomiting, or diarrhea
- Fatigue
- New loss of taste/smell
- Headache
- Muscle or body aches
- Poor feeding or poor appetite

* Disregard this symptom if school personnel already aware of a chronic, pre-existing condition that causes the symptom. The nature of the presenting symptom (e.g., duration, intensity) must be consistent with the underlying chronic condition.

**ACTION:** Apply appropriate PPE, isolate student/staff member until sent home; recommend they reach health care provider for instructions. Note: Other infections can cause same symptoms (e.g., flu, strep, etc.) but these do not rule out COVID-19 as co-occurring.

**STUDENT / STAFF TO STAY HOME UNTIL...**

**WITH PCR or Antigen COVID-19 viral test**
- Identity all close contacts (as defined by CDPH, identify atohants, class, bus, clubs, etc.). Quarantine and exclude close contacts (and work with public health on decision to exclude entire cohort) for 14-16 days from last day of exposure (see page 2).

**POSITIVE (Antigen or PCR)**
- If note from MD/DO/NP/PA or public health defines case as presumed COVID-19 virus (based on symptoms and circumstances), then:
  - Consider notifying staff and parents of class (or bus, etc.) of a potential exposure and (G) in conjunction with public health, exclude "close contacts" (using CDC definition) for 14-16 days from last day of exposure (see page 2).

**CONFIRMATORY PCR**
- If PCR is strongly positive, note from healthcare provider re: chronic illness.

**NEGATIVE PCR**
- Notified to school community of a known case.

**NEGATIVE Antigen**
- If school becomes aware of one case in one cohort (shared bus, class, room, lab, team, etc.), then having district's school's liaison contact the Public Health Department at 988-950-9805 to report the case and for further direction on quarantine. For questions on exposure, symptoms, or other related questions, please call the Epidemiology School Line at 988-950-8363 and leave a message.

**POSITIVE (Antigen or PCR)**
- Isolate the case. May return when:
  - 24 hours without fever (no meds) and (b) symptoms are improving and (c) at least 10 days from symptom onset or test date. *In athletics (not mere PE), require medical clearance form before return to practice/play.

**Note from healthcare provider re: chronic illness**
- A signed note from a licensed MD/DO/np/PA (who manages that condition) must confirm the chronic diagnosis (i.e., cdc's data, date of record when diagnosed); include provider's contact information; explain how symptoms are unrelated to COVID-19, and be accompanied by signed consent for school to interact with MD/DO/np/PA.

**STUDENT / STAFF TO STAY HOME UNTIL...**

**WITH PCR or Antigen COVID-19 viral test**
- Identity all close contacts (as defined by CDPH) identify atohants, class, bus, clubs, etc.). Quarantine and exclude close contacts (and work with public health on decision to exclude entire cohort) for 14-16 days from last day of exposure (see page 2).

**POSITIVE (Antigen or PCR)**
- If note from MD/DO/NP/PA or public health defines case as presumed COVID-19 virus (based on symptoms and circumstances), then:
  - Consider notifying staff and parents of class (or bus, etc.) of a potential exposure and (G) in conjunction with public health, exclude "close contacts" (using CDC definition) for 14-16 days from last day of exposure (see page 2).

**CONFIRMATORY PCR**
- If PCR is strongly positive, note from healthcare provider re: chronic illness.

**NEGATIVE PCR**
- Notified to school community of a known case.

**NEGATIVE Antigen**
- If school becomes aware of one case in one cohort (shared bus, class, room, lab, team, etc.), then having district's school's liaison contact the Public Health Department at 988-950-9805 to report the case and for further direction on quarantine. For questions on exposure, symptoms, or other related questions, please call the Epidemiology School Line at 988-950-8363 and leave a message.
Order of the Health Officer
Quarantine of Persons Exposed to COVID-19

A “close contact” is a contact with a COVID-19 patient that occurs anywhere between 48 hours before the COVID-19 patient’s symptoms began (or, for asymptomatic patients, two days prior to test specimen collection), and until the COVID-19 patient is no longer required to be isolated, and the contact:

1. Were within 6-feet of a COVID-19 patient for a cumulative total of 15 minutes or more over a 24-hour period; or
2. Had unprotected contact with the body fluids and/or secretions (including, but not limited to, being coughed on or sneezed on, sharing utensils, or drinking out of the same container) of a COVID-19 patient.

All persons without COVID-19 symptoms who have had close contact with a COVID-19 patient must immediately take quarantine themselves in their home or another residence. They may end quarantine and return to school/work after:

- 10 days (e.g., on the 11th day) after the last contact with a COVID-19 patient as long as they can self-monitor for COVID-19 symptoms and consistently use face covering and distance at least 6 feet from all others through Day 14.
- 14 days (e.g., on the 15th day) after the date of last exposure if they cannot self-monitor for COVID-19 symptoms nor consistently use face covering and distance at least 6 feet from all others after a 10-day quarantine or work with severely immunosuppressed persons (e.g., bone marrow or solid organ transplant, chemotherapy).
- Negative COVID-19 test results will not shorten the time for these individuals.
- If symptoms occur during quarantine, individuals should immediately self-isolate and contact their healthcare provider or San Diego County Public Health Services and seek testing.

NOTE: 7-day quarantine rarely applies in the K-12 school setting and only applies to healthcare workers; for further guidance see this memo.
COVID-19 Symptom Decision Tree

(Appplies regardless of vaccination status)

At childcare site, child or staff member develops any one of the following signs or symptoms:

- Fever with or without chills/shivers (fever defined as ≥100°F that does not resolve within 30 min. without medication)
- Cough
- Shortness of breath
- Nasal congestion/hinorhea (runny nose)
- Sore throat
- Nausea, vomiting, or diarrhea
- Fatigue
- New loss of taste/smell
- Headache
- Muscle or body aches
- Poor feeding or poor appetite

* Disregard this symptom if child care staff/personnel already aware of a chronic, pre-existing condition that causes the symptom.

The nature of the presenting symptom (e.g., duration, intensity) must be consistent with the underlying chronic condition.

**ACTION:**
- Apply appropriate PPE
- Isolate child/staff member until sent home
- Recommend they contact healthcare provider for instructions/testing
- Note: Other infections can cause similar symptoms (e.g., flu, strep) but these do not rule out COVID-19 as co-occurring

CHILD / STAFF TO STAY HOME UNTIL...

**With PCR or Antigen COVID-19 viral test (For diagnostic testing, PCR is already preferred)**

- Identify all close contacts (defined by CDC) (identify all child/guardian/class member(s), quarantine and exclude close contacts; and work with public health & local child care licensing regional office on decision to exclude 
- Consider notifying staff and parents of potential exposure: and (b) in conjunction with public health & local child care licensing regional office, exclude close contacts (using CDC definition) for 10 days from last day of exposure. For people without symptoms, a 14-day quarantine is still required unless a mask can be worn and 6 feet distance maintained when a person returns on days 11-14.

**Without PCR COVID-19 viral test OR with only a negative Antigen test**

- Note from healthcare provider re: chronic illness

**Note from healthcare provider re: chronic illness**

- A signed note from a licensed MD/DO/NP/PA (who manages that condition) must confirm the chronic diagnosis (i.e., dates, labs, date of record when diagnosed), include provider’s contact information; explain how symptoms are unrelated to COVID-19; and be accompanied by signed consent for childcare provider to interact with MDDCNP/PA.

**May return to childcare immediately**

- Consider individualized child health plan to prevent any future unnecessary dismissals.
# Return to Play/Sports Algorithm

San Diego Rady Children’s Health Network in partnership with CPCMG, RCSSD and AAP-CA Chapter 3

## Return to Play after COVID-19 Infection in Pediatric Patients

<table>
<thead>
<tr>
<th>Interim Recommendations as of January, 2021</th>
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### COVID-19 Infection

| Hordeal Pain, SSS, Tachypnea, Syncope, New Pregestations, PE: Abnormal Cardiac Exam |

### Asymptomatic or Mild Symptoms
- < 4 days of fever < 100.4, myalgia, chills or lethargy
- Clear for Participation With Gradual Return to Full Physical Activity (see Notes 2 & 3)

### After 10 Days Asymptomatic (without sore throat)

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<th>If No Significant Concerns</th>
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### MODERATE SYMPTOMS
- ≥ 4 days of fever > 100.4, myalgia, chills or lethargy
- Non-ICU Hospitalization & No evidence of MIS-C
- Clear for Participation With Gradual Return to Full Physical Activity (see Notes 2 & 3)

### SEVERE SYMPTOMS
- ICU Hospitalization due to COVID-19
- Life of MIS-C
- Abnormal Cardiac Testing/Labs

### Clear for Participation With Gradual Return to Full Physical Activity

| Note 1: All patients with a known or suspected history of a COVID-19 infection require clearance with a primary care provider. |

### Clear for Participation With Gradual Return to Full Physical Activity

| Note 2: Be alert for cardiac symptoms that may develop following return to full activity. Refer to Cardiology if symptoms. |

### Clear for Participation With Gradual Return to Full Physical Activity

| Note 3: Gradual Activity Progression adapted from Klinet E, et al. (2021), Indications, British Journal of Sports Medicine, 2021 (consider extending progression for Moderate COVID-19) |

### Cardio Referral Prior to Participation


## References


The guidelines are intended to support clinical assessment and medical decision making. A provider should not use these guidelines to replace the provider’s professional judgment. This guidance should be tailored to the patient’s clinical presentation and individual circumstances.

The COVID-19 Interim Guidance is updated based on current evidence and information available at the time of publication. This guidance will be reviewed and updated in the coming months as more data becomes available.

### American Academy of Pediatrics
Orange County Chapter

INcorporated in California
#IGOTTHESHOT Campaign:
We’ll mail a free #IGOTTHESHOT button to our first 75 members to sign up at this link.

Help raise awareness about the COVID-19 vaccine to your patients.

American Academy of Pediatrics, CA Ch3 Vaccine Button Signup
http://survey.constantcontact.com/survey/a07ehl5332okkzxa8i0/a002kl06lqgu/questions
Review of Disease Transmission and Infection Control in the Era of COVID-19 Pandemic

EYLÀ BOIES, MD, FAAP
COVID-19 and Infection Prevention in Schools

ALVARO GALVIS, MD, PhD
Q & A with Speakers

EYLA BOIES, MD, FAAP &
ALVARO GALVIS, MD, PHD
THANK YOU FOR JOINING

Evaluation Form
• www.surveymonkey.com/r/CME_ProjectFirstline02_17_21

MOC-2 Post-Test
• www.surveymonkey.com/r/MOC_ProjectFirstline02_17_21

National AAP/CDC Evaluation
• www.surveymonkey.com/r/6CW9DCT